

07-20-04

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021523 7590 06/21/2004

TESTA, HURWITZ & THIBEAULT, LLP
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BOSTON, MA 02110

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Oli Str	(Depositor's name)
OLIVER STRIMPEL	(Signature)
7/19/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/738.614	12/15/2000	Howard Kaufman	MDS-013A	2193

TITLE OF INVENTION: METHODS OF MONITORING EFFECTS OF CHEMICAL AGENTS ON A SAMPLE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SNAY, JEFFREY R	1743	436-164000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Testa, Hurwitz & Thibeault, LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2 _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Medispectra, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lexington, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
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(Authorized Signature) *William R. Haulbrook* (Date) 7-19-04

William R. Haulbrook Reg. No. 53,002

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01 FC:2501	665.00	OP
02 FC:1504	300.00	OP
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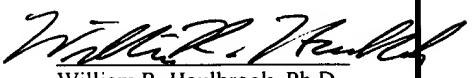
**TRANSMITTAL
FORM**

Express Mail Mailing Label No.: EV 219997773 US

TRANSMITTAL FORM	Application Serial Number	09/738,614
	Filing Date	December 15, 2000
	First Named Inventor	Kaufman
	Group Art Unit	1743
	Examiner Name	Jeffrey R. Snay
	Attorney Docket No.	MDS-013A (6219/19)
	Patent No.	Not applicable
	Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <input type="checkbox"/> Formal Drawing(s) 	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <ul style="list-style-type: none"> <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets] 	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) 	<input type="checkbox"/> Status Inquiry <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance [Total Sheets]	
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CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	<p>Respectfully submitted,</p> <p> William R. Haulbrook, Ph.D. Attorney for Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 </p>